Then we have Wilbur Ross. He is the nominee for Commerce. He is a billionaire. We have a Cabinet loaded with billionaires, despite how President-Elect Trump campaigned. Mr. Wilbur Ross is a billionaire with vast and complicated holdings. He just delivered his paperwork yesterday. His hearing is scheduled for tomorrow. The paperwork is very complicated. When you have \$1 billion, it is not just in U.S. treasuries. But they are rushing forward. The committee needs some time to review those documents before a hearing. I am hopeful we can move it back.

Then there is the fact that tomorrow there are four hearings. We have asked the majority to space out the hearing schedule so that Members who sit on multiple committees can have time to prepare and attend all the hearings. That is going to be very difficult for many Members tomorrow.

We have tried to cooperate with my friend, the majority leader. These are not good signs. They don't bode well.

You can see why the President-elect and Republicans are trying to rush these nominees through. The President-elect promised to change the way America operates, to oppose elites and the rigged system, to clean the swamp, and to pay attention to working families. But now he is rigging the Cabinet with billionaires and bankers. It is exactly the opposite of what the President-elect campaigned on, so they are trying to get it done as quickly as possible—the less scrutiny, the better. They don't want these people exposed for who they are and what they represent. Oh. no. that is not fair to the American people. They deserve the chance to get a good look at these nominees.

Thank you, Mr. President. I yield the floor.

RESERVATION OF LEADER TIME

The PRESIDING OFFICER (Mr. TILLIS). Under the previous order, the leadership time is reserved.

MORNING BUSINESS

The PRESIDING OFFICER. Under the previous order, the Senate will be in a period of morning business until 4:15 p.m., with Senators permitted to speak therein up to 10 minutes each.

The Senator from Georgia.

CBO ESTIMATE ON OBAMACARE REPEAL

Mr. ISAKSON. Mr. President, I am delighted to follow the distinguished minority leader, who is a gifted orator, a brilliant legislator, and an expert in something called disparate impact. Disparate impact is where you take two facts that are extraneous and put them together for an appearance of an irregularity or an impropriety without any fact being true.

The statements made about the CBO estimate were accurate in what he said but wrong in the implication. He is accurate that CBO did say it would cost money if we didn't have a replacement for ObamaCare, which is the replacement being worked on as we speak right here today. Both are facts, but when put together the way he put them together, it makes it look as though we are spending money that we are not, in fact, spending at all.

The CBO estimate also does not include the impact of legislative and administrative action to stabilize individual markets. In the absence of making that consideration, of course it is going to be more costly. Those are both extraneous facts that, when put together, make the appearance of a crime, which just isn't there.

NOMINATION OF TOM PRICE

Mr. ISAKSON. Mr. President, I come to the floor today to talk about my friend, Dr. Tom PRICE. In a way, I am glad the minority leader brought up Representative PRICE and brought up specific allegations that have been made against him so I can hopefully put some light on the misperception that those allegations made and, in fact, shine some positive light on a great nominee to be Secretary of Health and Human Services.

I have known Tom Price for 30 years of my life. He and his wife Betty are dear friends. Their son Robert is the age of one of my sons. He is a fine young man. Tom is a leader in our community, a leader in the Roswell United Methodist Church, the first-ever elected Republican majority leader of the State of Georgia Senate, the chairman of the Budget Committee of the U.S. House of Representatives, former president of the study committee in the House of Representatives, and an allaround terrific individual who has a litany and liturgy of recommended approvals and improvements that have made the United States of America legislatively and legally much better.

Tom is a family man. I mentioned Betty and his son Robert. He is an accomplished professional. He is an orthopedic surgeon. He and his wife Betty met during their residencies at Grady Memorial Hospital. She is an anesthesiologist. Tom is an accomplished orthopedic surgeon.

Tom is one of those orthopedists who came together with a number of other orthopedists to form what is known as Resurgens Orthopaedics, the largest orthopedic practice in the Southeastern United States—one of the finest anywhere in the country.

Tom has worked tirelessly in the Republican Party, tirelessly on the Democratic-Republican bipartisan agreements that have been made, and tirelessly on behalf of his community.

He is a fine individual and is uniquely qualified to be the Secretary of Health and Human Services. This is an agency that will spend \$1 trillion of the

taxpayers' money on an annual basis. You want a man who has been chairman of the Budget Committee. You want a man who understands finances. You want a former legislator who knows how to get the job done. Tom PRICE is that man.

In fact, I am particularly well qualified to introduce Tom to this body and recommend him as Secretary of HHS because he replaced me when I left the House when I was elected to the Senate. He has been reelected six times. He served 6½ terms in the House of Representatives, and he has an extensive legal background, an extensive legislative background, and an accomplished background of conservative leadership for the United States of America. Most importantly, he has done so on many issues dealing with medicine, and why not? He is an expert in medicine.

I know a little bit about real estate. I authored legislation on real estate. That is what you do when you are in a profession and know a little about something Congress is looking at. But the allegations made by Senator SCHUMER—and being echoed in some of the media and papers around town—are just another example of taking disparate impact.

I want to talk to you a little about what Senator SCHUMER was talking about. He was talking about the purchase of Zimmer Biomet stock, 26 shares, worth \$2,674. That is what he was talking about. The two disparate facts that he put together to make a wrong were this: The purchase was made without Tom's knowledge because his account is managed by Smith Barney and Morgan Stanley. They manage his account. They make the decisions about what to buy. Tom doesn't make them. Tom found out about it and documented it on April 4, even though the purchase was made in March. He didn't even know the purchase had been made on his behalf until it was disclosed, which he did as he is required to do by the STOCK Act.

Every single fact brought up by the distinguished minority leader is a fact that is a required disclosure of the rules of the U.S. Senate to the Ethics Committee under the STOCK Act. So don't make this look like some sinister thing, and let's take it at face value. If you take it at face value, it was a purchase TOM didn't make; it was made on his behalf. It was a purchase we documented that he didn't know about until the 4th of April; the purchase was made in March. The purchase did not work to his benefit because the decision was not made by him.

He is like every other Member of the Senate and House who makes required disclosures of their activity because of the STOCK Act. Tom obeyed the law. Tom did what was right. What was done is right and is being made to look wrong only because of appearance but not because of fact. That is the wrong way to take on the consideration of any nominee of a President of the United States to be a Secretary of any part of the Cabinet.

I reiterate: Who else would be better to oversee \$1 trillion in spending than TOM PRICE, chairman of the Budget Committee, former member of Ways and Means, an accomplished legislator who put together the largest orthopedic practice in Atlanta, GA, and the State of Georgia? He is well qualified and eminently qualified. This body should overwhelmingly confirm his nomination to be U.S. Secretary of Health and Human Services in the United States of America.

I am proud as his friend, I am proud as a former associate and legislator. I am proud as the person he succeeded in the U.S. House of Representatives, and I am proud as an American citizen to know that our President has picked someone who is eminently qualified, who has an impeccable record of success in his legislative jobs, who is a fine family man, a member of his church, a disciplined member of his political party and, most importantly, a man who loves his country and is volunteering to sacrifice his time and his knowledge to make America's Department of Health and Human Services better.

Lastly, there is a little rumor going around that he is not for extending Social Security. That is ironic to me. Let me tell you what he and I did in November and December. We traveled throughout Georgia on behalf of AARP, presenting ways to save Social Security. Day in and day out, Tom Price is on the record of the State of Georgia. fighting to preserve Social Security for those who have it and for those who will get it in the future. So don't take this disparate impact of extraneous facts someone put together to try to make a wrong out of a right. Instead, look at the record of an impeccable legislator, a dedicated family man, a great American, and the next Secretary of Health and Human Services of the United States of America, Dr. TOM PRICE.

I commend him to every Member of this Senate and hope you will confirm him when his vote comes before the Senate.

Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. HOEVEN). The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. CASSIDY. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

OBAMACARE REPLACEMENT PLAN

Mr. CASSIDY. Mr. President, I was pleased to see on the front page of the Washington Post that President-Elect Trump was speaking about how we should maintain at least the number of people covered under ObamaCare in a new kind of replacement for that portion of ObamaCare. If you will, I agree totally with him. We should fulfill this

promise and do it, as he said, at a lower cost.

We think we have a mechanism to do so with Senator COLLINS. We will speak to that today. First, let me point out, for those who are praising ObamaCare, I will say that since it has passed, the American people have been voting consistently against candidates who supported ObamaCare, culminating in the election of President-Elect Trump. So whatever folks might say about how wonderful it is, the American people are voting against it consistently.

That said, there is a mandate from the American people not just to repeal but to replace. So it is not that the American people don't want to have coverage, and they want folks with pre-existing conditions to have their issues addressed, but what they are concerned about is the way ObamaCare was forced upon them, with the power of Washington, DC, reaching into their own life, if you will, to their kitchen table, promising them penalties unless they comply with the Washington bureaucrats directly. That is what the American people do not like.

So, first, can we maintain coverage? President-Elect Trump said we are going to have insurance for everybody. Two, will we cover more? Yes. Three, can we lower costs? The answer there is yes.

Now, let's first speak to covering more Americans than ObamaCare. President-Elect Trump, Majority Leader McConnell, and Speaker Ryan have all committed to maintaining coverage for all

People speak of the advances made under ObamaCare. I will give them those advances. There are still 30 million people uninsured. Our alternative has the potential to cover 95 percent of Americans without a mandate. The way we do this is that as we return power to the States, we give States the option of saying that everyone who is eligible for coverage is enrolled unless they choose not to be.

Just like when I turned 65 and I am on Medicare. I am on Medicare. I don't feel it is a mandate. No one calls me up. Indeed, if I don't want to be on Medicare, I have to call someone up and tell them I don't want to be on it. State legislatures would have the option to say you are in unless you call and tell us you are out. I say that addresses two folks who are hard to reach; the fellow whose life is so in disarray that he is living beneath a park bench and the typical 28-year-old male who never thinks about health insurance. All of a sudden he is in without even realizing he is in, until he needs it, and then he will be very pleased.

On the other hand, if you don't want to be in, we make it easy to get out. By the way, I spoke of that fellow living beneath the park bench. As a physician who has worked in a hospital for the uninsured for 30 years, that was not tongue-in-cheek, and that is not a throwaway line. That person living beneath the park bench will never have

his life well enough together, or almost never, to go to a public library to log onto healthcare.gov. He does not have a W-2—and if he did, he lost it long ago—to submit it to sign up.

Under our program, he is enrolled. What are the benefits that he would get? He would have a health savings account so that if he goes to the urgent care center with a nail in his foot, it is covered. He has a pharmacy benefit, so that if he gets his life together while he is at that urgent care center to take an antipsychotic, he has a pharmacy benefit. Lastly, if something terrible happens, he is hit by a car or something, then he is brought to the hospital and that catastrophic coverage protects society against the cost of his hospitalization.

By the way, under our plan, we give States the power. I would like to think that this is something Democrats and Republicans can agree to. When Republicans say: You can keep your plan if you like it, and we mean it, we mean it. The way we would do this is that Congress would give States alternative options. The State would have the choice.

The State could go with the alternative, which we will lay out. The State could opt for nothing, no Medicaid expansion and no help for their lower income folks, or the State could opt to stay in ObamaCare. If Illinois, California, Massachusetts, New York want to stay in ObamaCare, we think they should have the right to stay in ObamaCare.

ObamaCare, if it is working for your State, God bless you. On the other hand, it is not working for a State where there are double-digit and sometimes triple-digit premium increases in 1 year.

So the State could choose to stay in ObamaCare, for nothing, or for the alternative, which we lay out for them. By the way, I would say that those who govern closest to those who are governed govern best. We know that the State of Alaska is far different than the State of California, Illinois, Louisiana, or New York. So let those States decide the system that works best for them.

What is the timeline? This year, 2017, we would like to repeal ObamaCare but put in place the legislation which allows, in 2018, for a State legislature or a Governor to choose the option they wish and the method by which they wish to enroll the people of their State. In 2019, the State would implement the replacement option of their choice. By 2020, the repeal and the replace would have been finished.

If, at a later date, a State wishes to change their option—they decided to stay with ObamaCare but on second thought now they wish to have the alternative we lay out, which I actually think would be something that might happen, they could choose that as a later option.

We are not being partisan. I tell folks, this is not a Republican plan, not